

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Wilensky Steve D.

1. Office, Agency, or Court

Agency Name - Central Sierra Child Support, Children and Families First Commission, Calaveras-Mariposa Community Action Agency, Mental Health Board, Mokelumne River Association, Motherlode Job Training Agency, Upper Mokelumne River Watershed Authority, Calaveras Board of Supervisors
Division, Board, Department, District, if applicable Your Position
Boards, Commissions, Committees

► If filing for multiple positions, list below or on an attachment.

Agency: See Above Position: Board Member Commissioner, Committee Member

2. Jurisdiction of Office (Check at least one box)

☐ State ☒ Multi-County Amador, Calaveras, Mariposa, Tuolumne ☐ Judge (Statewide Jurisdiction)
☐ City of ☐ County of ☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010. ☐ Leaving Office: Date Left ☐ The period covered is January 1, 2010, through the date of leaving office.
-or- The period covered is through December 31, 2010. ☐ The period covered is through the date of leaving office.
☐ Assuming Office: Date ☐ Candidate: Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page:

☐ Schedule A-1 - Investments - schedule attached ☐ Schedule C - Income, Loans, & Business Positions - schedule attached
☐ Schedule A-2 - Investments - schedule attached ☐ Schedule D - Income - Gifts - schedule attached
☒ Schedule B - Real Property - schedule attached ☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed 2/8/11 (month, day, year)

Signature

Clear Cover Page

Print Form



specify pages to print 1-10 101-110 111-120 121-130 131-140 141-150 151-160 161-170 171-180 181-190 191-200 201-210 211-220 221-230 231-240 241-250 251-260 261-270 271-280 281-290 291-300 301-310 311-320 321-330 331-340 341-350 351-360 361-370 371-380 381-390 391-400 401-410 411-420 421-430 431-440 441-450 451-460 461-470 471-480 481-490 491-500 501-510 511-520 521-530 531-540 541-550 551-560 561-570 571-580 581-590 591-600 601-610 611-620 621-630 631-640 641-650 651-660 661-670 671-680 681-690 691-700 701-710 711-720 721-730 731-740 741-750 751-760 761-770 771-780 781-790 791-800 801-810 811-820 821-830 831-840 841-850 851-860 861-870 871-880 881-890 891-900 901-910 911-920 921-930 931-940 941-950 951-960 961-970 971-980 981-990 991-1000

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name _____

► STREET ADDRESS OR PRECISE LOCATION
17425 Hwy 26

CITY
Glencoe CA 95232

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED 1/1/10 DISPOSED 1/1/10
Family Farm

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining _____ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
 ACQUIRED 1/1/10 DISPOSED 1/1/10

NATURE OF INTEREST
☐ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining _____ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____ TERM (Months/Years) _____
 _____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____ TERM (Months/Years) _____
 _____% ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

